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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS, WESTEN DIVISION		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Michael First name J Middle name Schafer Last name and Suffix (Sr., Jr., II, III)	Linda First name A Middle name Schafer Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0702	xxx-xx-9257

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Debtor 1 Michael J Schafer Debtor 2 Linda A Schafer

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Your Employer Identification Number (EIN), if any.	EIN	EIN			
5.	Where you live		If Debtor 2 lives at a different address:			
		21985 Waller Rd Fulton, IL 61252 Number, Street, City, State & ZIP Code Whiteside County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debi	tor 1 tor 2	Michael J Schafer Linda A Schafer					_	Case n	umber (if known)	
Part	2:	Tell the Court About Y	our'	Bankr	uptcy Cas	se				
7.	Bank	chapter of the cruptcy Code you are				rief description of each, see a			C. § 342(b) for Individuals Filin	ng for Bankruptcy
choosing to file under		sing to file under		Chapte	er 7					
				Chapte	er 11					
				Chapte	er 12					
				Chapte	er 13					
8.	How	you will pay the fee		abo orde	ut how you	u may pay. Typically, if you a attorney is submitting your pa	re paying	the fee yourself, y	ne clerk's office in your local co you may pay with cash, cashie r attorney may pay with a credi	er's check, or money
						the fee in installments. If ye in Installments (Official Form		e this option, sign	and attach the Application for	Individuals to Pay
				I red but i app	quest that is not requ lies to you	t my fee be waived (You ma uired to, waive your fee, and or r family size and you are una	y request may do so ible to pa	o only if your incor y the fee in install:	you are filing for Chapter 7. By the is less than 150% of the off ments). If you choose this option on 103B) and file it with your pe	ficial poverty line that on, you must fill out
9.	bank	you filed for ruptcy within the 3 years?		No. Yes.						
					District		When		Case number	
					District		When		Case number	
					District		_ When		Case number	
10.		any bankruptcy s pending or being		No						
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	•	Yes.						
					Debtor	Schafer Fisheries Inc			Relationship to you	ownership and common debt
					District	Northern District of Illinois	When	6/20/24	Case number, if known	24-80824
					Debtor				Relationship to you	
					District		When		Case number, if known	
11.	Do y	ou rent your		No	Go to liı	ne 12.				
	resid	lence?		Yes.	Has you	ur landlord obtained an evicti	on judam	ent against you?		
			_	. 55.	•	No. Go to line 12.	, 5	5 ,		
						Yes. Fill out <i>Initial Statemen</i> this bankruptcy petition.	t About ar	n Eviction Judgme	ent Against You (Form 101A) a	nd file it as part of

Case 24-80825 Doc 1 Filed 06/20/24 Entered 06/20/24 12:34:29 Desc Main Page 4 of 34 Document Michael J Schafer Debtor 1 Debtor 2 Linda A Schafer Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or

Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B)

I am not filing under Chapter 11. ☐ No.

■ No.

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes.

I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

Yes.

I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed. or a building that needs urgent repairs?

No.

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Michael J Schafer

Debtor 2 Linda A Schafer

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 24-80825 Doc 1 Filed 06/20/24 Entered 06/20/24 12:34:29 Desc Main Document Page 6 of 34

	tor 1 Michael J Schafer tor 2 Linda A Schafer	٢			Case nu	mber (if known)	
Par	6: Answer These Quest	ions for Re	porting Purposes				
16.	What kind of debts do you have?		Are your debts primarily condividual primarily for a pers			defined in 11 U.S.0	C. § 101(8) as "incurred by an
			No. Go to line 16b.				
			☐ Yes. Go to line 17.				
			Are your debts primarily be money for a business or investigation.				
			☐ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c.	State the type of debts you o	owe that are not consu	mer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter	r 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. I are paid that funds will be av				d and administrative expenses
	administrative expenses		□ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-199 □ 200-999		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,0	0	□ 50,00	1-50,000 1-100,000 than100,000
19.	How much do you estimate your assets to be worth?	□ \$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 \$10,000,002 \$50,000,002 \$100,000,000	1 - \$50 million	□ \$1,00 □ \$10,0	000,001 - \$1 billion 0,000,001 - \$10 billion 00,000,001 - \$50 billion than \$50 billion
20.	How much do you estimate your liabilities to be?	□ \$100,00	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 ■ \$10,000,000 □ \$50,000,000 □ \$100,000,000	1 - \$50 million	□ \$1,00 □ \$10,0	000,001 - \$1 billion 00,000,001 - \$10 billion 000,000,001 - \$50 billion than \$50 billion
Par	7: Sign Below						
For	you	I have exa	mined this petition, and I ded	clare under penalty of p	perjury that the ir	nformation provided	d is true and correct.
			nosen to file under Chapter 7 tes Code. I understand the r				
			ey represents me and I did I I have obtained and read th				help me fill out this
		I request re	elief in accordance with the	chapter of title 11, Unit	ed States Code,	specified in this pe	tition.
			nd making a false statement case can result in fines up				raud in connection with a 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Micha	el J Schafer J Schafer of Debtor 1		/s/ Linda A S Linda A Sch Signature of De	afer	
		Executed	June 20, 2024 MM / DD / YYYY			June 20, 2024 MM / DD / YYYY	

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			Document	Page 7 of 34		
Debtor 1 Debtor 2	Michael J Schafer Linda A Schafer				Case	number (if known)
•	attorney, if you are ted by one	under Chapt	ter 7, 11, 12, or 13 of title 11, Un	ited States Code, and h	ave ex	informed the debtor(s) about eligibility to proceed splained the relief available under each chapter
	not represented by ey, you do not need spage.	and, in a cas schedules fi	se in which § 707(b)(4)(D) applied with the petition is incorrect.	es, certify that I have no	knowl	ebtor(s) the notice required by 11 U.S.C. § 342(b) edge after an inquiry that the information in the
			d N. Golding	Dat	е	June 20, 2024
		Signature of	Attorney for Debtor			MM / DD / YYYY
		Richard N	. Golding			
		Printed name				
		The Goldin	ng Law Offices, P.C.			
			ulc Stroot			
		161 N. Cla Suite 1700				
		Chicago, I				
			City, State & ZIP Code			
		Contact phone	(312) 832-7885	Email addre	ess	rgolding@goldinglaw.net

0992100 IL Bar number & State

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Fill in this infor	mation to identify your	case:		
Debtor 1	Michael J Schafe	r		
	First Name	Middle Name	Last Name	_
Debtor 2	Linda A Schafer			
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, WESTEN DIVISION	_
Case number				
(if known)				☐ Check if this is an amended filing

B 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1:	List the 20 Unsecured Claims in C	ler from Largest to Smallest. Do No	t Include Claims by Insiders.	
				Unsecured claim
1	.	What is the nature of the claim	?	\$1,200.00
	Bank of America PO Box 851001 Dallas, TX 75285-1001	As of the date you file, the clair Contingent Unliquidated Disputed None of the above apply	,	
		Does the creditor have a lien or	n your property?	
		No		
	Contact	Yes. Total claim (secure	d and unsecured)	
	Contact phone	Value of security: Unsecured claim		
2		What is the nature of the claim	current property taxes are due	\$25,000.00
	carroll county IL	As of the date you file, the clair Contingent Unliquidated Disputed None of the above apply	,	
		Does the creditor have a lien or	n your property?	
		No		
	Contact	Yes. Total claim (secure	d and unsecured)	

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Debtor 1 Debtor 2	Michael J Schafer Linda A Schafer		Case nu	Case number (if known)			
C	contact phone		Value of security: Unsecured claim				
3		What	is the nature of the claim?	cosigned home loan for our son	\$30,000.00		
	Community State Bank	As of	the date you file, the claim is:	Chook all that apply			
	325 17th st Fulton, IL 61252		Contingent	Check all that apply			
•	unon, 12 01232		Unliquidated				
			Disputed				
			None of the above apply				
		Does	the creditor have a lien on you	ır property?			
			No				
C	ontact		Yes. Total claim (secured and	d unsecured)			
_	and the board		Value of security:				
	contact phone		Unsecured claim				
		What	is the nature of the claim?	payroll taxes	\$20,000.00		
	lept of revenue iowa DesMoines, IA	As of	the date you file, the claim is:	Check all that apply			
	Desimolites, IA		Contingent	oneen all anat apply			
			Unliquidated				
			Disputed				
			None of the above apply				
_		Does	the creditor have a lien on you	ır property?			
			No				
C	ontact		Yes. Total claim (secured and	d unsecured)			
_			Value of security:	-			
C	contact phone		Unsecured claim				
		What	is the nature of the claim?	state payroll witholding	\$20,000.00		
	Ilinois dept of revenue	A o of	the date very file the claim is:	Chook all that apply			
re	ockford, IL		the date you file, the claim is: Contingent	Check all that apply			
			Unliquidated				
			Disputed				
			None of the above apply				
		Does	the creditor have a lien on you	ır property?			
			No				
C	contact		Yes. Total claim (secured and	d unsecured)			
	Contact phone		Value of security: Unsecured claim				
	contact phone		Onsecured daim				
		What	is the nature of the claim?	IRS payroll tax lein Thomson and Fulton properties	\$545,000.00		
lr	nternal Revenus Service			· ·	-		

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Debtor 1 Debtor 2			Case nui	mber (if known)		
	Centralized Lien Operation Cincinnati, OH 45250-5595	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that appl	у	
		Does	the creditor have a lien on you	r property?		
			No			
	Contact		Yes. Total claim (secured and Value of security:	l unsecured)	\$545,00 - \$0.00	0.00
	Contact phone		Unsecured claim		\$545,00	0.00
7	IRS	What	is the nature of the claim?	941 payroll t	axes	\$900,000.00
	Davenport, IA	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that appl	y	
		Does	the creditor have a lien on you	r property?		
			No			
•	Contact		Yes. Total claim (secured and Value of security:	I unsecured)	-	
	Contact phone		Unsecured claim			
8		What	is the nature of the claim?	21957 Waller to 21985 Wa Fulton, IL 61 Residence: 2 waller rd fult illinois 61252	ller Rd 252 21957 ton,	\$25,510,000.00
	Newtek Small Business Finance 1981 Marcus Ave.	_	the date you file, the claim is: Contingent	Check all that appl	y	
	Suite 130 New Hyde Park, NY 11042		Unliquidated			
	New Hyde Fairk, NY 11042		Disputed			
			None of the above apply			
		Does	the creditor have a lien on you	r property?		
			No			
	Contact		Yes. Total claim (secured and unsecured) Value of security:		\$25,860 - \$350,00	<u> </u>
	Contact phone		Unsecured claim		\$25,510	,000.00
9		What	is the nature of the claim?	21985 Waller Fulton, IL 61 Other: 21985 Rd Fulton III (retail store a	252 Waller inois	\$2,406,000.00

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ebtor 1 ebtor 2	Michael J Schafer Linda A Schafer		Case nur	mber (if known)		
1	Newtek Small Business Finance 1981 Marcus Ave. Suite 130 New Hyde Park, NY 11042	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that apply	1	
_		Does	the creditor have a lien on you	r property?		
_			No			
C	Contact		Yes. Total claim (secured and	unsecured)	\$2,586,0	
_	Contact phone		Value of security: Unsecured claim		- \$180,000 \$2,406,00	
	oniac piono				ΨΣ, 400,0	
)		What	is the nature of the claim?	2112- 2114 S Rd Thomson Other: Schaf Fisheries pro plant	, IL 61285 er	\$1,986,000.00
	Newtek Small Business Finance	As of	the date you file, the claim is:	Check all that apply	/	
	Suite 130		Contingent			
1	New Hyde Park, NY 11042		Unliquidated Disputed			
			None of the above apply			
_		Does	the creditor have a lien on you			
			No	. p. opolity :		
_	Contact		Yes. Total claim (secured and	unsecured)	\$2,586,000.00	
			Value of security:	,	\$600,000	
C	Contact phone		Unsecured claim		\$1,986,0	00.00
		What	is the nature of the claim?	Intellectual: S Fish.com; S Smoked Fish	chafer	Unknown
	Newtek Small Business Finance	As of	the date you file, the claim is:	Check all that apply	,	
	1981 Marcus Ave. Suite 130		Contingent	onook all triat apply	,	
	New Hyde Park, NY 11042		Unliquidated			
			Disputed			
			None of the above apply			
_		Does	the creditor have a lien on you	r property?		
_			No			
C	Contact		Yes. Total claim (secured and	unsecured)	\$2,568,0	
_	Contact phone		Value of security: Unsecured claim		- Unknow Unknow	
2	Tovota Finacial Services	What	is the nature of the claim?	2018 GMC Te 112,000 miles Vehicle:		\$3,047.85

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ebtor 1 ebtor 2	Michael J Schafer Linda A Schafer		Case nui	mber (if known)						
	PO Box 4700	As of	the date you file, the claim is:	Check all that app	oly					
	Phoenix, AZ 85030		Contingent							
	,		Unliquidated							
			Disputed							
			■ None of the above apply							
-		Does	the creditor have a lien on you	r property?						
_		□	No							
	Contact		Yes. Total claim (secured and	l unsecured)	\$21,047.					
_			Value of security:		- \$18,000.					
	Contact phone		Unsecured claim		\$3,047.8	5				
3		What	is the nature of the claim?	Monthly che	-	\$200.00				
	University of Iowa	As of	the date you file, the claim is:	Check all that ann	alv.					
	lowa City, IA		Contingent	oneck all that app	, i y					
		ä	Unliquidated							
		ä	Disputed							
		•	None of the above apply							
-		Does	the creditor have a lien on you	r property?						
			No							
=	Contact		Yes. Total claim (secured and	l unsecured)						
_	Contact whome		Value of security:		-					
	Contact phone		Unsecured claim							
		What	is the nature of the claim?	property tax	ces are due	\$5,000.00				
	Whiteside county IL 61270	As of	the date you file, the claim is:	Check all that app	olv					
	12 01270		Contingent	orroom an man app	,					
			Unliquidated							
			Disputed							
			None of the above apply							
-		Does	the creditor have a lien on you	r property?						
			No							
_	Contact		Yes. Total claim (secured and	l unsecured)						
_			Value of security:		-					
	Contact phone		Unsecured claim							
art 2:	Sign Below									
nder po	enalty of perjury, I declare that the	information	provided in this form is true an	d correct.						
/s/	Michael J Schafer		X /s/ Linda A S	chafer						
	hael J Schafer		Linda A Scha							
Sigr	nature of Debtor 1		Signature of De	btor 2						
Date	e June 20. 2024		Date June 2	0 2024						

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Debtor 1 Michael J Schafer
Debtor 2 Linda A Schafer Case number (if known)

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			Doc	ument P	age 14 of 34				
Fill i	n this inform	nation to identify you	r case and this filing						
Debt	or 1	Michael J Schaf	er						
	_	First Name	Middle Name	La	ast Name				
Debt (Spou	or 2 se, if filing)	Linda A Schafer First Name	Middle Name	La	ast Name				
Unite	ed States Bar	nkruptcy Court for the:	NORTHERN DIST	RICT OF ILLINO	S, WESTEN DIVISION				
0									
Case	e number								eck if this is an ended filing
									_
Off	icial For	rm 106A/B							
Sc	hedule	e A/B: Prop	perty					12/1	15
nforn Answ	nation. If more er every quest	space is needed, attac	h a separate sheet to th	his form. On the to	e filing together, both are p of any additional pages or Have an Interest In				
1.1	Yes. Where is	the property?	What	t is the property? C	theck all that apply				
	21957 Wall	ler Rd	·	Single-family hom		Do not ded	uct secured cla	ims or exe	emptions Put
_		985 Waller Rd		Duplex or multi-ur		the amount	of any secure	d claims on	Schedule D:
	Street address, ii	f available, or other descriptio	"	Condominium or o	cooperative	Greations v	mo navo olali	10 0000100	aby rroporty.
				Manufactured or r	mobile home	Current va	lue of the	Current	value of the
-	Fulton		ZIP Code			entire prop	erty? 50,000.00	•	you own? \$350,000.00
	City	State	ZIP Code	Investment prope Timeshare	rty				
				Other		Describe the nature of your ownership inter (such as fee simple, tenancy by the entiretie			
			Who		the property? Check one	a life estat	e), if known.		
				,					
-	County			Debtor 1 and Deb	tor 2 only	Ob 1	. 16 41-1- 1		
				At least one of the	e debtors and another		t if this is com structions)	munity pro	орепту
				r information you verty identification	wish to add about this iten number:	n, such as lo	cal		
			Res	idence: 21957	waller rd fulton, illin	ois 61252			

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Michael J Schafer

	If you own or h	nave more	than one, list	ere:			
1.2			,	What is the property?	Check all that apply		
	204 3rd Ave. S	outh		☐ Single-family hom	ne	Do not deduct secured cla	
	Street address, if availa	able, or other des	scription	☐ Duplex or multi-ui	nit building	the amount of any secure Creditors Who Have Clair	
				Condominium or	cooperative	Creditors with trave chair	ns decured by I roperty.
					1.9.1		
	A II		04000	Manufactured or i	mobile nome	Current value of the	Current value of the
	Albany,	IL	61230	Land		entire property?	portion you own?
	City	State	ZIP Code	Investment prope	erty	\$40,000.00	\$40,000.00
				☐ Timeshare		Describe the nature of y	our ownership interest
				Other		(such as fee simple, ten	ancy by the entireties, or
				_	the property? Check one	a life estate), if known.	
				Debtor 1 only			
				Debtor 2 only			
	County			Debtor 1 and Deb	•	☐ Check if this is com	nmunity property
					e debtors and another	(see instructions)	
				Other information you property identification	wish to add about this item, number:	, such as local	
				Rental: post office	Albany Illinois		
1.3	If you own or h	ndridge Rd	I	What is the property? o	ne nit building	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
1.3	2112- 2114 Sar	ndridge Rd	I	What is the property?	ne nit building	the amount of any secure	d claims on Schedule D:
1.3	2112- 2114 Sar	ndridge Rd	I	What is the property? o	ne nit building cooperative	the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D:</i> ns Secured by Property.
1.3	2112- 2114 Sar	ndridge Rd	I	What is the property? (Single-family hom Duplex or multi-ui Condominium or	ne nit building cooperative	the amount of any secure	d claims on Schedule D:
1.3	2112- 2114 Sar Street address, if availa	ndridge Rd	Scription	What is the property? (Single-family hom Duplex or multi-un Condominium or on Manufactured or on	ne nit building cooperative mobile home	the amount of any secure Creditors Who Have Clair Current value of the	d claims on Schedule D: ms Secured by Property. Current value of the
1.3	2112- 2114 Sar Street address, if availa	ndridge Rd able, or other des	l ecription 61285	What is the property? (Single-family hom Duplex or multi-ui Condominium or o Manufactured or o Land	ne nit building cooperative mobile home	the amount of any secure Creditors Who Have Clain Current value of the entire property?	d claims on Schedule D: ms Secured by Property. Current value of the portion you own?
1.3	2112- 2114 Sar Street address, if availa	ndridge Rd able, or other des	l ecription 61285	What is the property? (Complex or multi-under the complex of the c	ne nit building cooperative mobile home	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00
1.3	2112- 2114 Sar Street address, if availa	ndridge Rd able, or other des	l ecription 61285	What is the property? (C Single-family hom Duplex or multi-un Condominium or on Manufactured or on Land Investment prope Timeshare	ne nit building cooperative mobile home erty nercial fish	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00 Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00
1.3	2112- 2114 Sar Street address, if availa	ndridge Rd able, or other des	l ecription 61285	What is the property? (c) Single-family hom Duplex or multi-un Condominium or un Manufactured or un Land Investment prope Timeshare Comm Other proce Who has an interest in	ne nit building cooperative mobile home erty nercial fish	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00 Describe the nature of y	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00
1.3	2112- 2114 Sar Street address, if availa	ndridge Rd able, or other des	l ecription 61285	What is the property? (c) Single-family hom Duplex or multi-un Condominium or or Manufactured or or Land Investment prope Timeshare Comm Other proce Who has an interest in Debtor 1 only	ne nit building cooperative mobile home erty nercial fish	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00 Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00
1.3	2112- 2114 Sar Street address, if availa Thomson City	ndridge Rd able, or other des	l ecription 61285	What is the property? (Complex or multi-unity) Duplex or multi-unity Condominium or	ne nit building cooperative mobile home erty nercial fish ess the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00 Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00
1.3	2112- 2114 Sar Street address, if availa	ndridge Rd able, or other des	l ecription 61285	What is the property? (Company of the property? (Company of the property) (Condominium of the pr	ne nit building cooperative mobile home erty nercial fish ess the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00 rour ownership interest ancy by the entireties, or
1.3	2112- 2114 Sar Street address, if availa Thomson City	ndridge Rd able, or other des	l ecription 61285	What is the property? (Complex or multi-under Condominium or the Condo	ne nit building cooperative mobile home erty mercial fish ess the property? Check one ertor 2 only ee debtors and another	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00 rour ownership interest ancy by the entireties, or
1.3	2112- 2114 Sar Street address, if availa Thomson City	ndridge Rd able, or other des	l ecription 61285	What is the property? (Complex or multi-under Condominium or the Condo	nit building cooperative mobile home erty nercial fish ess the property? Check one otor 2 only e debtors and another wish to add about this item,	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$600,000.00 Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$600,000.00 rour ownership interest ancy by the entireties, or

Case 24-80825 Doc 1 Filed 06/20/24 Entered 06/20/24 12:34:29 Desc Main Page 16 of 34 Document Debtor 1 Michael J Schafer Debtor 2 Linda A Schafer Case number (if known) If you own or have more than one, list here: 1.4 What is the property? Check all that apply 21985 Waller Rd. □ Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Street address, if available, or other description Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Current value of the Current value of the **Fulton** 61252 IL Land entire property? portion you own? \$180,000.00 \$180,000.00 City State ZIP Code Investment property Timeshare Describe the nature of your ownership interest commercial property (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property ☐ At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: Other: 21985 Waller Rd Fulton Illinois (retail store and cort office) 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$1,170,000.00 pages you have attached for Part 1. Write that number here..... Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put **GMC** Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **Terrain** Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2018 Year: Debtor 2 only Current value of the Current value of the 112,000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another Vehicle:

Entered 06/20/24 12:34:29 Case 24-80825 Doc 1 Filed 06/20/24 Desc Main Page 17 of 34 Document Michael J Schafer Debtor 1 Debtor 2 Case number (if known) Linda A Schafer 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No Yes 4 1 Make: homemade Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Model flat boat Debtor 1 only Creditors Who Have Claims Secured by Property. 1978 Year: Debtor 2 only Current value of the Current value of the ■ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$3,500.00 \$3,500.00 ☐ Check if this is community property Vehicle: (see instructions) 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$31,000.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household: living room furniture 1997 diningroom table and \$2,000.00 chairs, 1997 bedroom furniturex 3 1987 and older 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$500.00 Electronics: 3TV 5yrs old or older 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments Yes. Describe.....

Official Form 106A/B Schedule A/B: Property page 4

Sports-Hobby: 2 recumbant bikes

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

10. Firearms

□ No

Yes. Describe.....

\$400.00

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Debtor 1 Debtor 2 Michael J So Linda A Sch		r (if known)		
	Firearms: 5 hunting rifles	and 1 hand gun	\$700.00	
11. Clothes Examples: Everyday cl □ No ■ Yes. Describe	othes, furs, leather coats, designo	er wear, shoes, accessories		
		s and shirt sweatshirts tennis shoes1 airs dresslacks and dress shirts blouses ets	\$1,000.00	
12. Jewelry Examples: Everyday je □ No ■ Yes. Describe	welry, costume jewelry, engagem	nent rings, wedding rings, heirloom jewelry, watches, go	ems, gold, silver	
	Jewelry: wife wedding rin heirlooms	g 1974. I don't wear any jewelry. no	\$400.00	
■ No □ Yes. Give specific inf 15. Add the dollar value	formation	already list, including any health aids you did not		
Part 4: Describe Your Finan	icial Assets			
	egal or equitable interest in an	y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.	
□ No	have in your wallet, in your home	, in a safe deposit box, and on hand when you file your	petition	
		\$5000.00	\$0.00	
	avings, or other financial account If you have multiple accounts wit	s; certificates of deposit; shares in credit unions, broke h the same institution, list each. Institution name:	rage houses, and other similar	
	17.1.	Checking Account: central bank Illinois	\$10,000.00	
	17.2.	Checking Account: community state bank	\$700.00	

Page 19 of 34 Document Michael J Schafer Debtor 1 Debtor 2 Linda A Schafer Case number (if known) Checking Account: central bank savings \$1,000.00 17.3. Checking Account: central bank medical \$8.000.00 savings 17.4. Savings Account: central bank \$3,000.00 17.5. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No Yes. Give specific information about them..... Name of entity: % of ownership: \$0.00 **Private Stock: Schafer Fisheries** 100 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements □ No

Case 24-80825

Yes. Give specific information about them...

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Desc Main

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33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

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\$0.00

Copy personal property total

\$63,700.00

\$1,233,700.00

\$63,700.00

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

Official Form 106A/B Schedule A/B: Property page 8

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		Docume	nt Page 22 01 34	
Fill in this infor	mation to identify you	case:		
Debtor 1	Michael J Schafe	er		
	First Name	Middle Name	Last Name	
Debtor 2	Linda A Schafer			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, WESTEN DIVISIO	<u> </u>
Case number (if known)				☐ Check if this is an amended filing
Official Fo	orm 106C			

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the

	emption to a particular dollar amount and the the applicable statutory amount.	value of the propert	ty is d	letermined to exceed that amoun	t, your exemption would be limited					
Pa	Int 1: Identify the Property You Claim as Ex	xempt								
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.									
	You are claiming state and federal nonbank	cruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Check only one box for each exemption.							
	21957 Waller Rd next to 21985 Waller Rd Fulton, IL 61252	\$350,000.00		\$30,000.00	735 ILCS 5/12-901					
	Residence: 21957 waller rd fulton, illinois 61252 Line from <i>Schedule A/B</i> : 1.1		☐ 100% of fair market valuany applicable statutory							
	1999 Mercedes SLK 230 152,000.00 miles	\$9,500.00		\$4,800.00	735 ILCS 5/12-1001(c)					
	Vehicle: Line from Schedule A/B: 3.2		100% of fair market value, up to any applicable statutory limit							
	\$5000.00 Line from <i>Schedule A/B</i> : 16.1	\$0.00		\$0.00	735 ILCS 5/12-1001(b)					
	Line from Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit						
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/25 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	years after that for ca	ises fi	,	,					

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		Document F	Page 23	of 34		
Fill in this inform	nation to identify you	ır case:				
Debtor 1	Michael J Schaf	er				
	First Name		ast Name		-	
Debtor 2	Linda A Schafe	r				
(Spouse if, filing)	First Name	Middle Name L	ast Name		-	
United States Bar	kruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	OIS, WEST	EN DIVISION		
Case number(if known)						if this is an ded filing
Official Form	106D					
Schedule	D: Creditors	Who Have Claims So	ecured	by Propert	V	12/15
□ No. Check ■ Yes. Fill in	have claims secured by this box and submit that all of the information I Secured Claims	his form to the court with your other so	hedules. Yo	u have nothing else t	to report on this form.	
				Column A	Column B	Column C
for each claim. If me	ore than one creditor has	more than one secured claim, list the creditors a particular claim, list the other creditors in cal order according to the creditor's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Internal Re	evenus Service	Describe the property that secures the	claim:	\$545,000.00	\$0.00	\$545,000.00
Creditor's Name	1	IRS payroll tax lein Thomson a	and			
Centralize	d Lien	Fulton properties				
Operation Cincinnati	OΠ	As of the date you file, the claim is: Che	eck all that			
45250-559	,	apply. Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
	,	☐ Disputed				
Who owes the de	bt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mo car loan)	rtgage or secu	ired		
■ Debtor 1 and De	btor 2 only	■ Statutory lien (such as tax lien, mecha	anic's lien)			

☐ At least one of the debtors and another

Date debt was incurred 01/1/2019

 \square Check if this claim relates to a

community debt

☐ Judgment lien from a lawsuit

☐ Other (including a right to offset)

Last 4 digits of account number

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Deb	tor 1	Michael J Schafer		Case number (if known)		
		First Name Middle N	ame Last Name			
Deb	tor 2	Linda A Schafer				
		First Name Middle N	ame Last Name			
	Nev	wtek Small Business				\$25,510,000.
2.2		ance	Describe the property that secures the claim:	\$25,860,000.00	\$350,000.00	00
	Credit	itor's Name	21957 Waller Rd next to 21985			
			Waller Rd Fulton, IL 61252			
	198	1 Marcus Ave.	Residence: 21957 waller rd fulton,			
		te 130	As of the date you file, the claim is: Check all that			
		w Hyde Park, NY	apply.			
	110		☐ Contingent			
	Numb	ber, Street, City, State & Zip Code	Unliquidated			
\A/I ₂ -		a tha dahta o	Disputed			
_		s the debt? Check one.	Nature of lien. Check all that apply.			
	ebtor 2 ebtor 2	•	 An agreement you made (such as mortgage or s car loan) 	secured		
	ebtor ·	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	t least	t one of the debtors and another	☐ Judgment lien from a lawsuit			
		if this claim relates to a nunity debt	Other (including a right to offset) Non-Purc	chase Money Security		
Date	debt v	April 24, was incurred 2017	Last 4 digits of account number			
		•	Last 4 digits of account number			\$1,986,000.0
Date	New Fina	wtek Small Business ance	Describe the property that secures the claim:	\$2,586,000.00	\$600,000.00	\$1,986,000.0 0
	New Fina	was incurred 2017 wtek Small Business	<u> </u>	\$2,586,000.00	\$600,000.00	
	New Fina Credit	wtek Small Business ance tor's Name	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson,	\$2,586,000.00	\$600,000.00	
	New Fina Credit	wtek Small Business ance itor's Name 11 Marcus Ave. te 130	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that	\$2,586,000.00	\$600,000.00	
	New Fina Credit	wtek Small Business ance tior's Name If Marcus Ave. te 130 w Hyde Park, NY	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply.	\$2,586,000.00	\$600,000.00	
	New Fina Credit 198 Suit New 110	was incurred 2017 wtek Small Business ance itor's Name 31 Marcus Ave. te 130 w Hyde Park, NY	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent	\$2,586,000.00	\$600,000.00	
	New Fina Credit 198 Suit New 110	wtek Small Business ance tior's Name If Marcus Ave. te 130 w Hyde Park, NY	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$2,586,000.00	\$600,000.00	
2.3	New Fina Credit 198 Suit New 110 Numb	was incurred 2017 wtek Small Business ance itor's Name 31 Marcus Ave. te 130 w Hyde Park, NY	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent	\$2,586,000.00	\$600,000.00	
2.3	New Fina Credit 198 Suit New 110 Numb	was incurred 2017 wtek Small Business ance itor's Name 11 Marcus Ave. te 130 w Hyde Park, NY 142 per, Street, City, State & Zip Code s the debt? Check one.	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed		\$600,000.00	
2.3	New Fina Credit 198 Suit New 110 Numb	was incurred 2017 wtek Small Business ance itor's Name 11 Marcus Ave. te 130 w Hyde Park, NY 142 per, Street, City, State & Zip Code s the debt? Check one. 1 only	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.		\$600,000.00	
2.3	New Fina Credit 198 Suit New 110 Numb	was incurred 2017 wtek Small Business ance itor's Name 11 Marcus Ave. te 130 w Hyde Park, NY 142 per, Street, City, State & Zip Code s the debt? Check one. 1 only	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or s		\$600,000.00	
2.3 Who: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	New Fina Credit 198 Suit New 110 Numb o owes bettor 2 bettor 2 bettor 2	was incurred 2017 wtek Small Business ance itor's Name 21 Marcus Ave. te 130 w Hyde Park, NY 142 Der, Street, City, State & Zip Code s the debt? Check one. 1 only 2 only	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or sear loan)		\$600,000.00	
2.3 Who □ □ □ □ □ □ □ □ □ □ □ □	New Fina Credit 1988 Suid New 1100 Numb	was incurred 2017 wtek Small Business ance itor's Name 21 Marcus Ave. te 130 w Hyde Park, NY 142 Der, Street, City, State & Zip Code s the debt? Check one. 1 only 2 only 1 and Debtor 2 only	Describe the property that secures the claim: 2112- 2114 Sandridge Rd Thomson, IL 61285 Other: Schafer Fisheries processing plant As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) Statutory lien (such as tax lien, mechanic's lien)		\$600,000.00	

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Deb		Michael J Schafer		_	Case number (if known)		
Dob	-	irst Name Middle N	lame Last Name				
Deb		Linda A Schafer irst Name Middle N	lame Last Name	_			
	-						
2.4	1	ek Small Business			\$2,586,000.00	\$180,000.00	\$2,406,000.0
	Finar	1CE 's Name	Describe the property that secures		φ 2 ,300,000.00	\$100,000.00	0
			21985 Waller Rd. Fulton, IL Other: 21985 Waller Rd Fult	I			
	1981 Suite	Marcus Ave.	Illinois (retail store and cort	-			
		Hyde Park, NY	As of the date you file, the claim is:	Check all that			
	11042	•	apply. Contingent				
	Number	, Street, City, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	owes t	the debt? Check one.	Nature of lien. Check all that apply.				
	ebtor 1 d	only	An agreement you made (such as	mortgage or s	secured		
	ebtor 2 o	only	car loan)				
		and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
_		ne of the debtors and another	☐ Judgment lien from a lawsuit	- :	•		
		this claim relates to a nity debt	Other (including a right to offset)	First Mor	tgage		
`	Joinna	nty dobt					
Date	debt wa	as incurred	Last 4 digits of account num	ber			
	1						
2.5	Finar	ek Small Business	Describe the property that secures	the claim:	\$2,568,000.00	Unknown	Unknown
		's Name	Intellectual: Schafer Fish.co				
	1981	Marcus Ave.	Schafer Smoked Fish.com	,,			
	Suite	130	As of the date you file, the claim is:	Chask all that			
		Hyde Park, NY	apply.	Check all that			
	11042		Contingent				
	Number	, Street, City, State & Zip Code	Unliquidated				
Who	owes t	the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
`	ebtor 1		_				
_	ebtor 2	•	An agreement you made (such as car loan)	mortgage or s	securea		
_		and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
		ne of the debtors and another	☐ Judgment lien from a lawsuit				
Пс	heck if	this claim relates to a	Other (including a right to offset)	Non-Puro	chase Money Security		
(commun	nity debt	curer (mercuring a right to enecty				
Date	debt wa	as incurred	Last 4 digits of account num	ber			
2.6	Toyo	ta Finacial Services	Describe the property that secures	the claim:	\$21,047.85	\$18,000.00	\$3,047.85
	Creditor	's Name	2018 GMC Terrain 112,000 r	niles			
			Vehicle:				
	PO B	ox 4700	As of the date you file, the claim is:	Check all that			
	_	nix, AZ 85030	apply. Contingent				
		, Street, City, State & Zip Code	☐ Unliquidated				
		, , . , . , , ,	☐ Disputed				
Who	owes t	the debt? Check one.	Nature of lien. Check all that apply.				
	ebtor 1 d	only	☐ An agreement you made (such as	mortgage or s	secured		
	ebtor 2 d	only	car loan)				
	ebtor 1 a	and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
		ne of the debtors and another	☐ Judgment lien from a lawsuit				
		this claim relates to a	☐ Other (including a right to offset)				
•	Jonninun	nity debt					
Date	debt wa	as incurred 04/15/2022	Last 4 digits of account num	ber <u>8585</u>	5		

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Debtor	1 Michael J Schafe	r	Case number (if known)		
	First Name	Middle Name	Last Name		
Debtor	2 Linda A Schafer				
	First Name	Middle Name	Last Name		
Add th	e dollar value of your ent	ries in Column A on this page	\$34,166,047.85		
	is the last page of your fo that number here:	rm, add the dollar value total	\$34,166,047.85		
Part 2:	List Others to Be No	tified for a Debt That You	Already Listed		
trying to	collect from you for a de	bt you owe to someone else, ebts that you listed in Part 1,	list the creditor in Part 1, ar	you already listed in Part 1. For example, if a collection agency is not then list the collection agency here. Similarly, if you have more here. If you do not have additional persons to be notified for any	
	Name, Number, Street, City Paulina Garga-Chm	•	On	which line in Part 1 did you enter the creditor? 2.3	
	Dykema Gossett PL 10 S. Wacker Drive,	LC	Las	t 4 digits of account number	

IL 60600

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Fill	in this inform	ation to identify your c	ase:	Boodinene	. ago	21 01 04				
Deb	tor 1	Michael J Schafer								
		First Name	Midd	lle Name	Last Nam	ne				
	otor 2 use if, filing)	Linda A Schafer First Name	Midd	lle Name	Last Nam	ne				
		kruptcy Court for the:	NORTH	ERN DISTRICT OF ILL	INOIS. V	VESTEN DIVIS	SION			
01	ou Claice Bail	mapley Countries and								
Cas (if kno	e number own)								Check i	if this is an
Off:	icial Form	1065/5							amena	od ming
		<u>ा∪0⊏/</u> 'F: Creditors W	ha Hay	vo Uncopured	Claim					12/15
Be as	s complete and	accurate as possible. Use acts or unexpired leases	Part 1 for	creditors with PRIORITY	Y claims a	and Part 2 for c				st the other party to
Sche left. <i>A</i>	dule D: Credito	ory Contracts and Unexpi rs Who Have Claims Secu inuation Page to this page ber (if known).	ired by Pro	perty. If more space is n	needed, co	opy the Part yo	u need, fill it out, i	number the	entries in	the boxes on the
Part	List All	of Your PRIORITY Un	secured C	Claims						
1.	Do any creditor	s have priority unsecured	l claims ag	ainst you?						
	■ No. Go to Pa	rt 2.								
	Yes.									
i I	identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a par	s both prior r according	ity and nonpriority amounts to the creditor's name. If y	s, list that you have r	claim here and	show both priority a	nd nonpriori	ty amount	s. As much as
((For an explanat	ion of each type of claim, s	ee the instru	uctions for this form in the	instruction	,				
						T	otal claim	Priority amount		Nonpriority amount
2.1	carroll c	ounty		Last 4 digits of accoun	nt number	•	\$25,000.00		\$0.00	\$25,000.00
	Priority Cre	ditor's Name				04/4/0004				
	IL			When was the debt inc	curred?	01/1/2024				
		eet City State Zip Code		As of the date you file,	the claim	is: Check all th	at apply			
	Who incurred	the debt? Check one.		☐ Contingent						
	Debtor 1 or	ıly		☐ Unliquidated						
	Debtor 2 or	nly		☐ Disputed						
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY uns	ecured cl	aim:				
	☐ At least one	e of the debtors and anothe	r	■ Domestic support ob	ligations					
	☐ Check if th	is claim is for a commun	itv debt	☐ Taxes and certain ot		vou owe the gov	ernment			
		ubject to offset?	,	☐ Claims for death or p						
	■ No			Other. Specify						
	☐ Yes			cui	rrent pr	operty taxes	s are due			
2.2	dept of r	evenue iowa		Last 4 digits of accoun	nt number	-	\$20,000.00		\$0.00	\$20,000.00
		ditor's Name		When we the debt in		04/4/2040	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•	<u> </u>
	DesMoin	ies. IA		When was the debt inc	currea?	04/1/2019				
		eet City State Zip Code		As of the date you file,	the claim	is: Check all th	at apply			
	Who incurred	the debt? Check one.		☐ Contingent						
	Debtor 1 or	nly		☐ Unliquidated						
	Debtor 2 or	ıly		☐ Disputed						
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY uns	ecured cl	aim:				
	☐ At least one	e of the debtors and anothe	r	■ Domestic support ob	ligations					
	☐ Check if th	is claim is for a commun	ity debt	☐ Taxes and certain ot	her debts	you owe the gov	ernment			
	Is the claim su	ubject to offset?		☐ Claims for death or p		-				
	No			Other. Specify						
	☐ Yes			pa	yroll tax	(es				

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Debtor 2 Linda A Schafer	Case number (if known)						
2.3 illinois dept of revenue Priority Creditor's Name	Last 4 digits of account number	\$20,000.00	\$0.00	\$20,000.00			
·	When was the debt incurred? 01/1/	/2019					
rockford, IL Number Street City State Zip Code	As of the date you file, the claim is: Che	ock all that apply					
Who incurred the debt? Check one.	☐ Contingent	ок ан шасарру					
Debtor 1 only	☐ Unliquidated						
Debtor 2 only							
Debtor 1 and Debtor 2 only	☐ Disputed Type of PRIORITY unsecured claim:						
_	<u></u>						
☐ At least one of the debtors and another	■ Domestic support obligations						
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Taxes and certain other debts you owe☐ Claims for death or personal injury whill	•					
No	☐ Other. Specify	e you were intoxicated					
□ Yes	state payroll wit						
2.4 IRS	Last 4 digits of account number	\$900,000.00	\$0.00	\$900,000.00			
Priority Creditor's Name	When was the debt incurred? 12/1/	/2019					
Davenport, IA							
Number Street City State Zip Code	As of the date you file, the claim is: Che	eck all that apply					
Who incurred the debt? Check one.	☐ Contingent						
☐ Debtor 1 only	☐ Unliquidated						
Debtor 2 only	☐ Disputed						
■ Debtor 1 and Debtor 2 only	■ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim:						
\square At least one of the debtors and another	☐ At least one of the debtors and another ☐ Domestic support obligations						
☐ Check if this claim is for a community debt	☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated						
Is the claim subject to offset? No	☐ Other. Specify						
☐ Yes	941 payroll taxes	s					
2.5 Whiteside county	Last 4 digits of account number	\$5,000.00	\$0.00	\$5,000.00			
Priority Creditor's Name		Ψ3,000.00	Ψ0.00	Ψ5,000.00			
W 04070	When was the debt incurred?						
IL 61270 Number Street City State Zip Code	As of the date you file, the claim is: Che	ck all that apply					
Who incurred the debt? Check one.	☐ Contingent						
Debtor 1 only	☐ Unliquidated						
Debtor 2 only	☐ Disputed						
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:						
☐ At least one of the debtors and another	■ Domestic support obligations						
☐ Check if this claim is for a community debt	☐ Taxes and certain other debts you owe	the government					
Is the claim subject to offset?	☐ Claims for death or personal injury whill						
■ No	Other. Specify	•					
☐ Yes	property taxes a	re due					
Part 2: List All of Your NONPRIORITY Unsec	ured Claims						
3. Do any creditors have nonpriority unsecured claim	ns against you?						
\square No. You have nothing to report in this part. Submi	t this form to the court with your other schedule	es.					
■ Yes.							
• •							

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of

Debtor 1 Michael J Schafer

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	1 Michael J Schafer 2 Linda A Schafer		Case number (if known)	
Par	t 2.			
				Total claim
4.1	Bank of America	Last 4 digits of account number	2417	\$1,200.00
	Nonpriority Creditor's Name	_		
	PO Box 851001 Dallas, TX 75285-1001	When was the debt incurred?	Date Opened: 10/1/1989 Last Used: 06/18/2024	_
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	a plans, and other similar debts	
	Yes	Other. Specify		_
4.2	Community State Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$30,000.00
	1325 17th st	When was the debt incurred?		
	Fulton, IL 61252			_
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	☐ Yes	Other. Specify cosigned h	ome loan for our son	_
4.3	University of Iowa	Last 4 digits of account number		\$200.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	Iowa City, IA	When was the dept mounted:		_
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	_	Student loans		
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	iration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Monthly ch	eck ups at cancer center	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

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Debtor 2	Linda A Schafer	Case number (if known)	
Debtor 1	Michael J Schafer		

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
T. ()	6a.	Domestic support obligations	6a.	\$ 970,000.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 970,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 31,400.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 31,400.00

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Fill in th	his information to identify your	case:		
Debtor '	Michael J Schafe			
D - l- ((First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,		Middle Name	Last Name	
	States Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS, WESTEN DIVIS	ION
0				
Case nu (if known)	umber			☐ Check if this is an amended filing
Offici	ial Form 106H			
	edule H: Your Cod	ehtors		12/15
<u> </u>	adie II. Todi ood	<u>CDIOI3</u>		12/13
1. E Ariz 3. In C in Ii For	a, and number the entries in the me and case number (if known) to you have any codebtors? (If you you have any codebtors? (If you you have any codebtors? (If you you have any codebtors, have you you, California, Idaho, Louisiana, No. Go to line 3. Yes. Did your spouse, former spouse. Did your spouse, former spouse and you	boxes on the left. Attach. Answer every question. you are filing a joint case, of a lived in a community property Nevada, New Mexico, Purples, or legal equivalent lived ors. Do not include your fithat person is a guarantee.	the Additional Page to this page to this page to this page to not list either spouse as a component of the c	mmunity property states and territories include and Wisconsin.) spouse is filing with you. List the person shown by have listed the creditor on Schedule D (Official se Schedule D, Schedule E/F, or Schedule G to file
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		blumn 2: The creditor to whom you owe the debt neck all schedules that apply:
3.1	Fisher Trucking Inc 21985 Waller road Fulton, IL 61252-9780			Schedule D, line Schedule E/F, line Schedule G with Small Business Finance
			INC	THE CHAIL DUSINESS I MAILLE
3.2	Jesse L. Schafer 753 7th Ave South Clinton, IA 52732			Schedule D, line Schedule E/F, line 4.2 Schedule G
				ommunity State Bank
3.3	Schafer Fisheries Inc. 21985 Waller Rd Fulton, IL 61252-9780			Schedule D, line Schedule E/F, line Schedule G ewtek Small Business Finance

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois, Westen Division

In re	Michael J Schafer Linda A Schafer		Case No	D.		
	Linda A Ocharer	Debtor(s)	Chapter			
	DISCLOSUDE OF COMPL	NCATION OF ATTOD	NEV EOD I	NEDTOD(C)		
	DISCLOSURE OF COMPE			` ,		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the fillible rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy,	or agreed to be pa	id to me, for services rendered or to		
				12,000.00		
	Prior to the filing of this statement I have received	<u> </u>	\$	0.00		
	Balance Due		\$	12,000.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed com	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.				
	☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and rend b. Preparation and filing of any petition, schedules, stac c. Representation of the debtor at the meeting of credid d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on he 	atement of affairs and plan which tors and confirmation hearing, and reduce to market value; exec tons as needed; preparation	may be required; d any adjourned h mption plannin	earings thereof;		
6.	By agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			nces, relief from stay actions or		
		CERTIFICATION				
this l	I certify that the foregoing is a complete statement of a bankruptcy proceeding.	ny agreement or arrangement for	payment to me fo	r representation of the debtor(s) in		
J	June 20, 2024	/s/ Richard N. Gol				
	Date	Richard N. Goldin				
		Signature of Attorney The Golding Law				
		161 N. Clark Stree				
		Suite 1700				
		Chicago, IL 60601		700		
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